

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PO BOX 98933
LINCOLN NE 68509-8933

Case Name – CHILD'S NAME
CONTACT – SC NAME
Phone Number - (402)111-0000
Toll Free Number - (877)213-4754
Fax Number - (402)111-1111
Date of Notice - 09-15-2014
Mail Date - 09-16-2014

CHILD'S NAME
1234 ANY STREET
HUSKERLAND NE 00000

AUTHORIZATION NOTICE UPDATE
Waiver Aged and Disabled
UPDATED ON 09-15-2014 AT 10:06am

This is to notify you that we have authorized the provider you selected as detailed below.

INTERIM HEALTHCARE OF LINCOLN
Provider Telephone - (402)421-7920

Authorized Service: DISABILITY RELATED IN HOME CHILD CARE

Authorized Clients
CHILD'S NAME

Client ID#
12345678

Authorization #
00000000

Authorized Period: 10-01-2014 through 09-30-2015 ****Authorization end date should reflect the end date of client's annual assessment cycle**

Authorized Units:
930.00 Hours

Authorized Rate:
41.220 per Hour effective 10-01-2013
42.150 per Hour effective 07-01-2014

EFFECTIVE 10-1-2014:
PARENTAL PORTION: \$ 3.00 /HOUR
WAIVER PORTION: \$ 39.15/HOUR

Child care services are authorized while ***both parents are working simultaneously/parent is working (choose the statement that fits the family situation) *and the child is not in school (*this statement to be added as applicable); (state parent schedule(s) here).** This includes **(insert number of hours needed for drive time)** hour(s) round-trip drive time.

Economic Assistance
Toll Free: (800)383-4278
Lincoln: (402)323-3900
Omaha: (402)595-1258

Go online:
ACCESSNebraska.ne.gov